DATENT	ADDL	ICATION.	<b>FEE DETER</b>	BAINI ATIONI	DECODD
PAIFNI	APPI.	ICATION	FFF DFIFK	MINALIUN	RECURI

Effective October 1, 2000

Application or Docket Number

10010445-1

CLAIMS AS FILED - PART I						SMALL ENTITY			OTHER			
TOTAL CLAIMS		(Column 1)		(Column 2)		Î	TYPE		OR I	SMALL		
TOTAL CLAIVIS		14		i			RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =				. [	X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT						ſ	+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter				r "0" in c	olumn 2		TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PAR				T II			'		}	OTHER	THAN	
(Column 1)				(Colur		(Column 3)	_	SMALL E	ENTITY	OR	SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	·	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		. [	+135=		OR	+270=	
							ı	TOTAL		اما	TOTAL	
		(Calumn 1)		(Colu	mn 2\	(Column 3)		ADDIT. FEE		J • · · ·	ADDIT. FEE	
Γ		(Column 1) CLAIMS		HIGH	IEST		1 r		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		ا '	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)				-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM	IEST IBER OUSLY	PRESENT EXTRA	]	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N O	Total .		Minus	**		=	] [	X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=		X40=			X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		]	7,40-		OR	700-	<b>-</b>
	MAIL				. 40n t	.h		+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		mber Previously Pa ber Previously Pa					er fou	ind in the app	ropriate bo	k in co	lumn 1.	